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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

5

Application Number

09/727,198

Filing Date

November 30, 2000

First Named Inventor

Triozi

Art Unit

1648

Examiner Name

Ulrike Winkler

Attorney Docket Number

CIR 2-005

ENCLOSURES (Check all that apply)

- | | | |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance communication to Technology Center (TC) |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input checked="" type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Remarks | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Request for Continued Examination | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

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OFFICE OF PETITIONS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	J. K. Mueller, Jr. Mueller and Smith, LPA
Signature	
Date	November 05, 2003

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Signature

Date

November 5, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Appln. No. 09/727,198
Petition to Revive dated November 5, 2003
Reply to Advisory Action dated of September 8, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Triozzi, *et al.*
Serial No. : 09/727,198
Filed: : Nov. 30, 2000
For: : NON-CYTOLYTIC SOLUBLE FACTOR FROM
ACTIVATED-EXPANDED CD4 CELLS
TC/AU : 1648
Examiner : Ulrike Winkler
Attorney Docket No. : CIR 2-005

Attention: Office of Petitions
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Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Responsive to the Advisory Action mailed on September 8, 2003 we are transmitting a Petition to Revive and Request for Continued Examination herewith.

Respectfully submitted,

Date: November 5, 2003


Jerry K. Mueller, Jr.
Reg. No. 27,576
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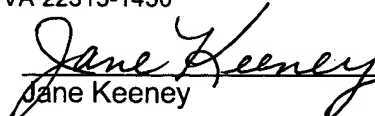
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